

Transition to ICD-10: What it Entails and Why It's Important to Behavioral Health Providers

What is ICD-10?

ICD-10-CM/PCS (International Classification of Diseases, 10th Edition, Clinical Modification/ Procedure Coding System) consists of two parts for diagnosis (CM) and inpatient procedure coding (PCS). Diagnosis coding under ICD-10-CM uses 3 to 7 digits instead of the 3 to 5 digits used with ICD-9-CM and the format of the code sets is similar.

Why is ICD-10 being substituted for ICD-9, which is currently in use?

ICD-9 produces limited data about patients' medical conditions and hospital inpatient procedures. ICD-10 coding is much more specific and detailed in terms of diagnoses and can be used for pay-for-performance and biosurveillance.

When does this start?

October 1, 2014. After this date, ICD-9 codes in current use will no longer be accepted for diagnostic and billing purposes.

Why is this important to behavioral health providers (i.e., providers of services for substance use and mental disorders)?

ICD-10 will affect diagnosis and inpatient procedure coding for everyone covered by the Health Insurance Portability and Accountability Act (HIPAA). The change to ICD-10 does not affect CPT coding for outpatient procedures. However, all of the services provided for either substance use or mental disorders are subject to HIPAA standards; therefore, behavioral health providers must shift to ICD-10 on October 1, 2014.

What should a provider be doing to prepare for ICD-10?

The Centers for Medicare and Medicaid Services recommends developing an implementation strategy that includes an assessment of the impact on your organization, a detailed timeline, and a budget. Check with your billing service, clearinghouse, or practice management software vendor about their compliance plans. Providers who handle billing and software development internally should plan to utilize appropriate resources for medical records/coding, clinical, IT, and finance staff to coordinate ICD-10 transition efforts. It is important to implement staff training on the appropriate use of ICD-10 codes, modifications to your billing procedures that accommodate ICD-10, and to determine if your electronic health record provider is making the appropriate systems updates so that you will be ICD-10 compliant on October 1, 2014.

What are the consequences of not transitioning to ICD-10 on Oct 1, 2014?

As of the implementation date, only billable services that utilize appropriate ICD-10 codes will be processed for payment. Failure to use ICD-10 codes or to use these codes appropriately will significantly delay payment for services provided or result in non-payment.

Can I begin using ICD-10 before Oct 1, 2014?

No. CMS and other payers will not recognize ICD-10 codes until October 1, 2014.

How will behavioral health providers know how to use ICD-10 and its codes in practice?

The Diagnostic and Statistical Manual of Mental Disorders-5 (DSM-5) includes ICD-10 codes for mental and substance use disorders. Trainings on ICD-10 are being developed that will be available to behavioral health providers by webinar and that will be archived on the websites of the organizations offering these trainings. CMS also has extensive information available to assist clinicians and other service providers in preparing for ICD-10 online at

<http://www.cms.gov/Medicare/Coding/ICD10>.

Where can I find the ICD-10 codes?

The code sets and official guidelines are available free of charge on the [2014 ICD-10-CM and GEMs](#) and [2014 ICD-10-PCS and GEMs](#) pages of the [CMS ICD-10 website](#).

For more information, see the CMS implementation [timelines and checklists](#) for large practices, small and medium practices, small hospitals, and payers. In addition, implementation guides are available in the [Provider Resources](#) section of the CMS ICD-10 website.



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